

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Michael H. Dunn
Serial No.: 10/816,537
Filed: April 1, 2004
Title: Virtual Flip Chart Method and Apparatus
Art Unit: 2629
Examiner: Sheng, Tom V.
Our Ref.: 871462.00024.PA124238-0-US

**PETITION TO WITHDRAW FROM ISSUANCE
PURSUANT TO 37 CFR 1.313(C)**

Office of Petitions
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant hereby petitions to withdraw the above-referenced patent application from Issuance pursuant to 37 CFR 1.313(c)(2) in order to file a Request for Continued Examination (RCE) pursuant to 37 CFR 1.114. The RCE is being filed in order to allow the Patent Office to consider additional prior art references that recently became known to the Applicant prior to issuance of the patent.

The Issue Fee for this application has not been paid.

Applicant submits herewith a "Request for Continuing Examination" Transmittal along with the submission of an Information Disclosure Statement, including copies of the cited prior art documents.

Adjustment Date: 06/11/2010 LDIEP1
06/08/2010 INTEFSW 00004047 170055 10816537
01 FC:1464 130.00 CR

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Applicant further submits herewith a Fee Transmittal authorizing the Commissioner to withdraw the \$130 fee for the instant Petition pursuant to 37 CFR 1.17(h) and the \$810 fee for the RCE pursuant to 37 CFR 1.17(e), for a total of \$940, along with any additional fees deemed necessary arising from this, or any other, communication from Deposit Account No. 17-0055.

Respectfully submitted,

Michael H. Dunn

Dated: 6-7-10

By: *M. Jaskolski*
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(414) 277-5711
Reg. No. 37,551

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND									
1 Date of Request:	06/10/10	2 Serial/Patent #	10/816,537						
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT					
<input type="checkbox"/> Filing				\$					
<input type="checkbox"/> Amendment				\$					
<input type="checkbox"/> Extension of Time				\$					
<input type="checkbox"/> Notice of Appeal/Appeal				\$					
<input checked="" type="checkbox"/> Petition 1464			06/07/10	\$ 130.00					
<input type="checkbox"/> Issue				\$					
<input type="checkbox"/> Cert of Correction/Terminal Disc.				\$					
<input type="checkbox"/> Maintenance				\$					
<input type="checkbox"/> Assignment				\$					
<input type="checkbox"/> Other				\$					
		7 TOTAL AMOUNT OF REFUND	\$ 130.00						
8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check							
<input type="checkbox"/> Overpayment		<input checked="" type="checkbox"/> Credit Deposit A/C #:							
<input type="checkbox"/> Duplicate Payment		9	1	7	--	0	0	5	5
<input checked="" type="checkbox"/> No Fee Due (Explanation):									
The petition is dismissed as moot; the petition is unnecessary.									
11 REFUND REQUESTED BY:									
TYPED/PRINTED NAME:		Irvin Dingle	TITLE: Paralegal						
SIGNATURE:		/Irvin Dingle/	PHONE: 2-3210						
OFFICE: Petitions									
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****									
APPROVED: 		DATE: 6/11/10							

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B